

**PROFORMA FOR SAFE DRINKING WATER AND SANITARY
CONDITION CERTIFICATE**

No 16Dated 23.2.24

It is to certify that an inspection team headed by J.K. Jain AEPHE Mandsaur
Hemita (Pondya) Bhatt Chemist
(Name of the officers with Designation) from P.H.E. S. Dn. MANDSAUR

(Name of Department /office) inspected the VEDAANT VIDYALAYA at MANDSAUR, DIST.-
MANDSAUR, MP on 22.2.24 and found that VEDAANT VIDYALAYA at MANDSAUR,
DIST.- MANDSAUR, MP has safe drinking water facilities for the students and members of
staff of the institution and is maintaining the hygienic sanitation condition in the school
building & the campus as per the norms prescribed by the Central/ State /UT Govt.

The above is valid for a period of One Year

Signature with seal: _____

(Signature)
Assistant Engineer
P.H.E. Sub. Mandsaur

Name: J.K. JainDesignation: AEPHE Mandsaur

Name & address of the office/Department: - _____

To,
VEDAANT VIDYALAYA
MANDSAUR, DIST.- MANDSAUR, MP
(Name and address of the institution)

(Signature)
Principal
VEDAANT VIDYALAYA
MANDSAUR (M.P.)

(Signature)
Manager
VEDAANT VIDYALAYA
MANDSAUR (M.P.)

कार्यालय सहायक यंत्री लोक स्वास्थ्य यांत्रिकी उपखण्ड मंदसौर

दूरभाष क्रमांक 07422-255284 फॉक्स 07422-255215

क्रमांक 187 / प्र.शा / स.य. / लो.स्वा.यां.वि. / 2023 मंदसौर, दिनांक 22-02-24

Vedaant Vidhyalaya
before MPEB Sitaman Road
Mandsaur

जल नमूने के परिष्करण उपरांत प्रतिवेदन प्रस्तुत करने का अवसर।

संलग्न क्रमांक 16 दिनांक 29/1/2024

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उपरोक्त विषय एवं संदर्भ में लेख है कि आपके द्वारा प्रेषित जल नमूनों का
परिष्करण एवं वीरामु परिष्करण निम्नांगीय जिला स्तरिय जल परीक्षण प्रयोगशाला में किया गया
संलग्न परिणामों का प्रतिवेदन आपकी ओर संलग्न कर प्रस्तुत है।

संलग्न :- उपरोक्तानुसार

सहायक यंत्री
लोक स्वास्थ्य यांत्रिकी
उपखंड मंदसौर

क्रमांक / प्र.शा / स.य. / लो.स्वा.यां.वि. / 2023 मंदसौर, दिनांक
प्रतिलिपि -

1. कार्यपालन यंत्री लोक स्वास्थ्य यांत्रिकी उपखंड मंदसौर की ओर सूचनाार्थ प्रेषित।

सहायक यंत्री
लोक स्वास्थ्य यांत्रिकी
उपखंड मंदसौर

Principal
VEDAANT VIDYALAYA
MANDSAUR (M.P.)

Manager
VEDAANT VIDYALAYA
MANDSAUR (M.P.)

Sample was collected by Lab
 No. of Sampling - 16
 Date of Report - 29/11/24
 No. of bottles used - 16
 Date of analysis completed - 29/11/24

Sample No. / Lab
 16
 Date of Report
 29/11/24

Sample Identification Code
 MDS
 Name of Sample
 Mandsoor

Name of Sample
 Drinking Water
 Village
 Mandsoor

Name of Sender
 Vedant Vidhyalaya
 Mandsoor
 Gram Panchayat
 Mandsoor

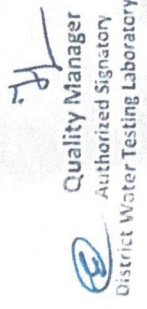
S.No.	Block	Village	Habitat	Location	Source
1	Mandsoor	Mandsoor	Mandsoor	Sitaman Road	TW
2					
3					
4					
5					

Discipline : Chemical, Group : Water

Details of parameters, their test methods, units and specifications as per BIS

S.No.	Characteristics	Test Method	Unit	As per BIS 10500:2012 & Amendment Jan 2021 for Drinking water		Test Result
				Requirement (Desirable Limit)	Permissible Limit in the absence of Alternate Sources	
1	Total Hardness as CaCO ₃	IS 3025 (P-21):2009 RA 2019	Mg/l	200	600	432
2	Calcium as Ca*	IS 3025 (P-40):1991 RA 2019	Mg/l	75	200	192
3	Magnesium as Mg*	IS 3025 (P-46):1994 RA 2019	Mg/l	30	100	80.2
4	Total Alkalinity as CaCO ₃	IS 3025 (P-23):1986 RA 2019	Mg/l	200	600	182
5	Chloride as Cl*	IS 3025 (P-54):1983 RA 2017	Hazen	5	15	1.0
6	Colour*	IS 3025 (P-11):1983 RA 2017	pH scale	6.5 to 8.5	Agreeable	7.8
7	PH*	IS 3025 (P-5):2018		Agreeable	Agreeable	Agreeable

1. This report shall not be produced or used in full without written permission of laboratory.
 2. Samples will be stored for a period of 30 days from the date of issue of report.
 3. This laboratory does not hold any responsibility for variation in results for samples kept on hold.
 4. Results relate only to the items tested and the sample as received.
 5. Collection of sample from the source. This information is provided by the Customer's only and laboratory will not be responsible for such information.
 6. H.P. Hand pump, TWS Tube well.
 7. The Characteristics marked with * are proposed to accreditation by NABL.


 Quality Manager
 Authorized Signatory
 District Water Testing Laboratory Mandsoor



Principal
 VEDAANT VIDYALAYA
 MANDSAUR (M.P.)


VEDAANI VIDYALAYA
 MANDSAUR (M.P.)

Sender's Letter No. <u>16</u> Date: <u>29/1/24</u>		DWTL Receipt No. <u> </u>		Unique Identification Code/UMDS <u> </u>	
Physical and Chemical Test Report with details of Parameters, their Test methods, Units and Specifications as per BIS					
S.No	Characteristics	Yes/Method	Unit	Test Results	
				1	2
9	Nitrate as No ₃	PDA Method. Based on std. Method 1960 & NEERI Manual 2012	Mg/l	45	45
10	Taste	IS 3025 (P-8) : 1984 RA 2017	-	Agreeable	Agreeable
11	Sulphate as SO ₄	IS 3025 (P-24) : 1986 RA 2022	Mg/l	200	400
12	TDS	IS 3025 (P-16) : 1984 RA 2017	Mg/l	500	2000
13	Fluoride as F ⁻	IS 3025 (P-60) : 2008 RA 2019	Mg/l	1.0	1.5
14	Turbidity	IS 3025 (P-10) : 1984 RA 2017	NTU	1.0	5.0
15	Iron as Fe	IS 3025 (P-53) : 2003 RA 2014	Mg/l	1.0	1.0
16	Manganese as Mn	IS 3025 (P-59) : 2006 RA 2017	Mg/l	0.1	0.3
Bacteriological Test Report With Details of their Test Methods, Units and Specifications as per BIS					
S.No	Characteristics	Test Method	Unit	Test Results	
				1	2
1	Total Coliform	APHA 23 rd Edition	Per 100ml	00	00
2	Faecal Coliform (TTC)	APHA 23 rd Edition	Per 100ml	00	00

Specific Information :

Remarks (if Any)-


Quality Manager
 Authorized Signatory
 District Water Testing Laboratory Mandasaur


Principal
 VEDAANI VIDYALAYA
 MANDSAUR (M.P.)

VEDAANI VIDYALAYA
MANDSAUR (M.P.)

Issue no. /DWTL/PHED/MDS//2023 Issue Date: *End of Report*

Page 1 of 1

Online Payment Form

Department: 34 - Public Health Engineering
Registration No./TIN No.:
Name of Payer/Depositor: VEDHANT VIDHYALAY MANDS. Office Name: EE PHED MANDSAUR
State: Madhya Pradesh District: Mandsaur
Treasury For Refund: Mandsaur Treasury

Address details of payee
House/Building No.: Mandsaur Street/Road Name: Mandsaur
City/Town: Mandsaur State: Madhya Pradesh
District: Mandsaur
Pin Code: 458001

Online Details
Mobile Number: 8989828891 Email Id: chauhanofficial.3011@gmail.com
From Date: To Date:
Head Of Account: Select
Purpose:
Amount:

[Click here to Add Challan](#)

You can submit more than one challan by adding more challan option. Maximum 10 challans can be added at a time.

From Date	To Date	Head of Account	Purpose	Amount	Delete
27/02/2024	27/02/2024	0215 - 01 - 800 - 0000 - Other Receipts	Water testing	1550	

Payment Details
Bank Name: STATE BANK OF INDIA
Payment Method: Online Payment Over The Counter EFT

Total Amount(Rs.) 1550
Amount in words(Rs.) One Thousand Five Hundred Fifty Rupees only

Principal
VEDAANT VIDYALAYA
MANDSAUR (M.P.)

Manager
VEDAANT VIDYALAYA
MANDSAUR (M.P.)